



**GOSZ &  
PARTNERS, LLP**

33  
IFW  
450 Bedford Street  
Lexington Massachusetts  
02420  
Tel. (781)863 - 1116  
Fax (781)863 - 1101  
E-mail wgosz@gsiplaw.com

**USPTO**  
**Commissioner for Patents**  
P. O. Box 1450  
Alexandria, VA 22313-1450

December 2, 2005

**Revocation of Power of Attorney with  
new Power of Attorney and change of correspondence address**

Dear Sirs:

Please find attached a Revocation of Power of Attorney with new Power of Attorney and change of correspondence address for patents listed on attachment A.

Sincerely,

William Gosz

Encl.



PTO/SB/82 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

|                        |                        |
|------------------------|------------------------|
| Application Number     | Multiple: Attachment A |
| Filing Date            | Multiple: Attachment A |
| First Named Inventor   | Multiple: Attachment A |
| Art Unit               | Multiple: Attachment A |
| Examiner Name          | Multiple: Attachment A |
| Attorney Docket Number | Multiple: Attachment A |

**I hereby revoke all previous powers of attorney given in the above-identified application.**☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number:

56679

☒ Please change the correspondence address for the above-identified application to:☐ The address associated with  
Customer Number:

56679

**OR**

|                                                     |                                            |       |       |                   |       |
|-----------------------------------------------------|--------------------------------------------|-------|-------|-------------------|-------|
| <input type="checkbox"/> Firm or<br>Individual Name | William G. Gosz                            |       |       |                   |       |
| Address                                             | Gosz & Partners, LLP<br>450 Bedford Street |       |       |                   |       |
| City                                                | Lexington                                  | State | MA    | Zip               | 02420 |
| Country                                             | United States                              |       |       |                   |       |
| Telephone                                           | 781 863 1116                               |       | Email | wgosz@gsiplaw.com |       |

**I am the:**☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

|           |                |           |                |
|-----------|----------------|-----------|----------------|
| Signature |                |           |                |
| Name      | Michael Panian |           |                |
| Date      | 11/28/2005     | Telephone | (610) 878-3314 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## Assignments on the Web &gt; Patent Query

## Patent Assignment Abstract of Title

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For pending or abandoned applications please consult USPTO staff.**

## Total Assignments: 1

Patent #: NONE

Issue Dt:

Application #: 09987196 Filing Dt: 11/13/2001 ✓

Publication #: [US20030093045](#) Pub Dt: 05/15/2003

Inventor: Carol L. Erdman

Title: Absorbing article having zoned areas of hydrophilicity

## Assignment: 1

Reel/Frame: [012562/0744](#)

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Pages: 3

Conveyance: ASSIGNMENT OF ASSIGNORS INTEREST (SEE DOCUMENT FOR DETAILS).

Assignor: [ERDMAN, CAROL L.](#)

Exec Dt: 01/25/2002

Assignee: [PARAGON TRADE BRANDS, INC.](#)180 TECHNOLOGY PARKWAY  
NORCROSS, GEORGIA 30092Correspondent: HUNTON & WILLIAMS  
CHRISTOPHER C. CAMPBELL  
INTELLECTUAL PROPERTY DEPARTMENT  
1900 K STREET, N.W., SUITE 1200  
WASHINGTON, DC 20006-1109

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